PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10071035

		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN	
TOTAL CLAIMS			11				ΙГ	RATE	FEE]	RATE	FEE
FOR MOGOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			(minus 20=		* <i>O</i>		IΓ	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		* 0		ΙΓ	X42=		OR	X84=	
MULTIPLE DEPENDENT CLÁIM PI			RESENT				I					
* If the difference in column 1 is less than zero, enter "0" in column 2						L	+140=		OR	+280=		
							٦	TOTAL		OR	TOTAL	740
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)						_ s	MALL E	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	- 20		= 0		X\$ 9=		OR	X\$18=	
	Independent	<u>* 2</u>	Minus	***	<u> </u>	= 2	IГ	X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM		<u>ا</u> ا ا	140=.		OR	+280=	
			•				<u> </u>	TOTAL		OR	TOTAL ADDIT, FEE	0
(Column 1) (Column 2) (Column 3)											ADDII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	1г	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		8		K\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		a		X42=		OR	X84=	
5	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								0	On		
							Ŀ	140=		OR	+280=	
							ADI	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	44		=] [,	(\$ 9=		OR	X\$18=	
	Independent	•	Minus	state .		e-]	(42=		- 1	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								140=		OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write "O" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The *Highest Nun	nber Previously Pai	d For" (Total or	Independ	ent) is the	highest numb	er found	in the app	ropriate box	in cot	umn 1.	